



Indiana State  
Department of Health

# Immunization E-Letter

Issue #282

July 3, 2008

## Save the Date: Upcoming Satellite Broadcast Immunization Update 2008 - August 28, 2008

INSIDE THIS ISSUE:	
ISDH Reportable Disease of the Month—West Nile Virus	2
Vaccine Storage and Handling Toolkit	3
CHIRP Tip	3
CHIRP Trainings	3

This live satellite broadcast and webcast will provide up-to-date information on the rapidly changing field of immunization. Anticipated topics include influenza and zoster vaccines, recently approved vaccines, and updates on vaccine supplies and vaccine safety.

The 2.5 hour broadcast will occur live from 9:00 am to 11:30 am and will be re-broadcast that day from 12:00 noon to 2:30 pm (Eastern Time). Both broadcasts will feature a live question-and-answer session in which participants nationwide can interact with the course instructor via toll-free telephone lines.

Continuing Education Credits will be provided. For further information about viewing either the satellite broadcast or accessing the webcast, go to [www.cdc.gov/vaccines/ed](http://www.cdc.gov/vaccines/ed)

## VFC Vaccine Availability

Please be advised, the following vaccines are not currently available at this time:

TriHIBit—DTaP/Hib

PedvaxHIB—Hib

Vaqta—Hep A

Comvax—Hep B/Hib

ProQuad—MMRV

We will advise you as these vaccines become available.

## PLEASE NOTE REGARDING VACCINE RETURNS

If you have expired vaccine to return, **DO NOT SEND IT TO GIV OR ISDH. ALL EXPIRED VACCINE SHOULD BE RETURNED TO THE MCKESSON WAREHOUSE ONLY.** You should use the McKesson box that your vaccines are delivered in and you should use the label that is located on the under flap of the box. Once you have packed the vaccine for return, give the package to your UPS Driver the next time he/she is in. **DO NOT CALL FOR A SPECIAL PICK-UP. THEY WILL CHARGE YOU \$10.00 FOR THIS SERVICE.** Remember to complete a Return Vaccine Form and fax it to ISDH at 317-233-3719.

### Immunization Program

2 N. Meridian St.  
Indianapolis, IN 46204

Phone: (800) 701-0704  
E-mail: [immunize@isdh.in.gov](mailto:immunize@isdh.in.gov)

## ISDH Reportable Disease of the Month - West Nile Virus

### What are the symptoms of West Nile Virus?

West Nile virus (WNV) is transmitted to humans by infected mosquitoes during the late summer and early fall in Indiana, but may occur year round in the southern United States. About 80 percent of those infected with WNV never become symptomatic, but those over the age of 50 are more likely to develop symptoms.

The incubation period for WNV ranges from two to 14 days, and may be longer in immunosuppressed persons. Symptomatic infection is usually limited to fever, headache, and fatigue, but may also include truncal rash, swollen lymph nodes, and eye pain. Occasionally, people will develop more severe central nervous system (CNS) disease, including aseptic meningitis or encephalitis, characterized by altered mental status which may progress to confusion, seizures, or coma, or focal neurologic deficits, including limb paralysis and cranial nerve palsies. Tremors and movement disorders have also been seen with WNV encephalitis. A flaccid paralysis syndrome called West Nile poliomyelitis may also occur, but is less common than meningitis or encephalitis. This is usually characterized by the acute onset of asymmetric limb weakness or paralysis without sensory loss and may occur in the absence of fever, headache, or other common WNV symptoms. If this involves respiratory muscles, acute respiratory failure may result.

Because there are no human vaccines available to prevent WNV, it is important to interrupt disease transmission. This is most effectively accomplished by:

- Applying insect repellent containing N,N-Diethyl-*meta*-toluamide (DEET), Picardin, or oil of lemon eucalyptus to clothes and exposed skin;
- Eliminating mosquito breeding sites by emptying standing water from flower pots, buckets, barrels or gutters;
- Staying indoors between dusk and dawn when mosquitoes are most active; and
- Using intact screens on windows to keep mosquitoes out.

The diagnosis of WNV should be considered in any person with a history of fever, headache and fatigue, especially in the elderly population.

### What do I do if I suspect WNV in one of my patients?

1. Laboratory testing is required to confirm the diagnosis of WNV. Obtain a serum sample for Immunoglobulin M (IgM) upon suspicion of WNV. Keep the sample refrigerated before and during transport to the laboratory.
2. If you suspect CNS disease, send a Cerebrospinal fluid (CSF) sample for IgM in addition to the serum sample. Keep the CSF refrigerated before and during transport to the laboratory.
3. Document any recent travel or vaccination against yellow fever, Japanese encephalitis, or dengue fever, as this may cause cross-reactivity with WNV IgM.
4. Imaging may be used to rule out other causes of altered mental status, but is not diagnostic in WNV or other flavivirus encephalitis. MRI scans will yield nonspecific abnormal results in 25-35 percent of cases.
5. Report the suspected case of WNV to the Indiana State Department of Health (ISDH) immediately at (317) 233-1325.

### What if my patient's test results are positive for West Nile virus?

1. A positive acute IgM in the absence of recent infection with or immunization against another flavivirus such as yellow fever, or dengue, will make your patient a probable case, and should be reported to the ISDH. There is no specific treatment for WNV.

### Do I need to do anything if the results are negative?

1. WNV IgM may be below detectable levels if drawn during early infection. If negative, draw a convalescent serum IgM in 10-12 days for repeat testing.
2. Use this opportunity to educate your staff and patients about the symptoms and prevention of West Nile Virus.

According to the Indiana Communicable Disease Reporting Rule for Physicians, Hospitals and Laboratories, suspect cases of WNV must be reported to the ISDH immediately. For more information, call the ISDH Surveillance and Investigation Division at (317) 233-1325.

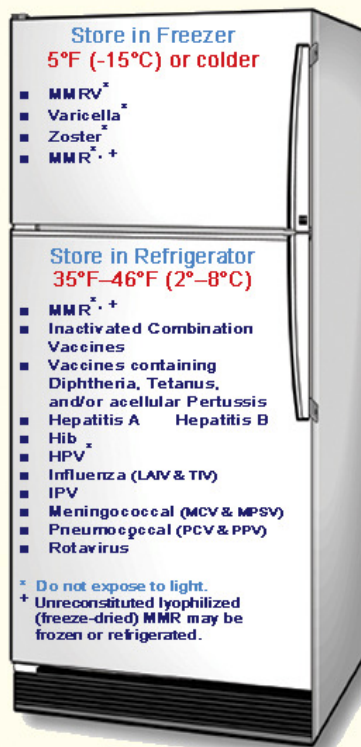
## Vaccine Storage and Handling Toolkit

## CHIRP Tip

### Burden of Cold Chain Failure

An estimated 17% to 37% of providers expose vaccines to improper storage temperatures. Refrigerator temperatures are more commonly kept too cold rather than too warm. Out-of-range temperatures require immediate action.

Loss of vaccine potency due to improper storage conditions is a costly mistake. Patients receiving vaccine with decreased potency caused by improper storage conditions may not be fully protected against the vaccine-preventable disease. In the General Recommendations on Immunization, the Advisory Committee on Immunization Practices (ACIP) and the American Academy of Family Physicians (AAFP) state that mishandled vaccine doses should not be counted as valid doses and should be repeated unless serologic testing indicates a response to the vaccine. Recalling patients to repeat vaccine doses because vaccine has been stored improperly can damage public confidence in vaccines and in your practice.



Some CHIRP users occasionally experience problems with vaccination dates, vaccines, or lot numbers not lining up properly on the display. In Windows, this is often due to large size DPI settings, an advanced display setting under display properties. If you experience this issue, click the following to restore normal DPI settings:

From Control Panel, click the "Display" icon, then the "Settings" tab in the top right-hand corner of the Display Properties dialog box. Then, click the "Advanced" button in the lower right-hand corner. From the "General" tab, click the DPI setting drop-down box and select "Normal size (96 DPI)" and then click "OK." This should resolve the issue.

## CHIRP Informational Sessions

## CHIRP User Group Meeting

## State Funded Vaccine Webinars

CHIRP Informational Sessions are designed for NON-CHIRP users interested in learning more about the benefits of using CHIRP in their facility or practice.

Call (888) 227-4439 or go to [CHIRP.IN.GOV](http://CHIRP.IN.GOV) to register.

July 16, 2008  
1:00 pm–3:00 pm

### Floyd County

Floyd Memorial Hospital, Paris Health  
Education Center, Classroom 1  
1850 State Street  
New Albany, IN 47150

This session is designed for CURRENT CHIRP users who are interested in learning about upcoming changes or who have specific questions regarding CHIRP usage.

Call (888) 227-4439 or go to the [CHIRP.IN.GOV](http://CHIRP.IN.GOV) to register.

July 16, 2008  
9:30 am–11:30 am

### Floyd County

Floyd Memorial Hospital, Paris Health  
Education Center, Classroom 1  
1850 State Street  
New Albany, IN 47150

The following sessions have been planned to further explain State Funded Vaccine to providers who are interested in learning more. These sessions will be online and require an Internet connection and speakers. You may register by sending an e-mail to [avounce@isdh.in.gov](mailto:avounce@isdh.in.gov) noting which session you will be attending and to what e-mail address to send the invitation. Sessions are limited to the first 20 individuals.

A–Tuesday, July 22, 2008–7:00 am  
B–Wednesday, July 23, 2008–8:30 am  
C–Thursday, August 21, 2008–7:30 am  
D–Friday, August 22, 2008–Noon